



Navy Medicine Strategic Diversity Initiative

**RADM Bonnie B. Potter, MC, USN
(ret)**



Navy Medicine Strategic Diversity Initiative

- Charter and Background
- Diversity Dimensions
- Key Issues and Challenges
- Preliminary Recommendations
- Next Steps



Charter for Navy Medicine Strategic Diversity Initiative

“Develop Navy Medicine’s strategic diversity goals, implementation plan, and metrics to ensure mission success and enable all Sailors and civilians to achieve their personal and professional potential.”



Include Strategies to Ensure...

- The delivery of culturally competent healthcare
- Development of an inclusive workforce which maximizes our opportunities for innovation and problem solving
- Recruitment strategies which foster accession of a demographically diverse workforce
- Leadership development which gives current leaders the skills to manage an inclusive workforce
- Mentorship which encourages and support the progression of personnel from diverse backgrounds to leadership roles



What Is Diversity?

- Navy Definition: Diversity is all of the different characteristics and attributes of individual Sailors and civilians that enhance the mission readiness of the Navy.
- Navy Med Diversity Initiative: “all socially relevant characteristics and experiences that define each of us as individuals...”
- An organizational philosophy that leverages each individual to optimize mission success.



Why Is Diversity Important?

- Mission Readiness - GWOT requires “diversity of thought”
- An Imperative For Business Success; “...critical to the Navy’s future success” per CNO
- 21st Century Demographics – “The military (and our leadership) should reflect the diversity of the Nation we serve.”
- Total Force Strategy – active, reserve, civilian and contractor – the strategy by which we recruit, develop, promote and retain the highest quality individuals.

Diversity

Dimension



 **Primary Dimensions**

 **Secondary Dimensions**



Challenges/Key Issues

- Recruiting/Accessions
- Retention
- Morale
- Communication
- Resources



Recruiting/Accessions

- Scholarship Problems
 - HPSP accessions are down
 - Process lacks peer to peer interaction with applicants
 - HPSP students receive poor customer service
- Increased competition for applicants
- Changing demographics of applicant pool
- Lack of “professional” medical recruiters



Navy Medicine FY05

	Enlisted	Officer	US
White	48%	76.8%	69%
Black	22.5%	7.9%	12.3%
API	11.2%	6.7%	3.6%
Hispanic	9.3%	4.8%	12.5%
Other	9.0%	3.8	2.6%



Medical and Dental School

- In 2001, 33.3% of medical school graduates were minorities, but only 10.6% were URM (URM=Black, Mexican Americans, mainland Puerto Rican, Native American); 19.8% were API.
- In 2001, 35.5% of dental school graduates were minorities, but only 10.8% were URM; 24.8% were API.



Retention

- Mentoring
 - Very important to Navy career
 - 37% satisfied with access to mentoring
- Communication
 - Rumors, uncertainties, inaccurate information
 - 60% concerned about policy changes hurting their job
- Leadership Development
 - 41% satisfied with leadership
- Poor Customer Service
 - Pay and reimbursement issues



Morale

- Volume/accuracy of information
- Amount and speed of change
 - PBD 712/Military to civilian conversions
 - Organizational Changes at BUMED and Commands
- Uncertainties about the future
 - GME
 - BRAC/Unified Command
- OPTEMPO/Deployment Inequities
- Am I valued by Navy Medicine?



Communication

- We are confronted with millions of facts, figures and opinions every minute, every hour, every day.
- “CNN Factor”
- In spite of the volume of information, misinformation and lack of *essential* information have left people confused, unsure of the road ahead, and uncertain about their future in the organization.



Diversity Resources

- The best business leaders provide the visibility and commit the time and resources to improve diversity.
- Navy leadership – from the CNO down – is committed to improving diversity across the Navy.
- We need to create an environment that encourages and enables all Sailors and civilians to reach their personal and professional potential.



Preliminary Recommendations

- Improve recruiting efforts
 - Pilot MECP for MC/DC
 - Improve HPSP customer service
 - Everyone is a recruiter: AD, reserves, retirees
 - Target high school students
- Improve retention
 - Everyone should have access to a mentor; mentors need training and recognition on evaluations/fitness reports
 - Improve leadership development: Diversity, Communication, Mentorship
 - Top leadership must visibly support diversity; must be unequivocal in belief in the value of inclusiveness



Recommendations (cont)

- Improve morale
 - When uniqueness is respected in people, morale and productivity improve.
 - People need to feel included and know they are valued.
 - Need more communication of accurate information from the top down.
 - Evaluation period is opportunity to gather feedback and suggestions for improvements
- Communication, communication, communication!
 - Everyone has the need to know and the right to know.
 - Accurate information starts at the top and should be pushed to all hands.
 - Information should include the importance of diversity to the organization.



Next Steps

- Surgeon General providing visibility and resources to improve diversity
- Work group is formulating goals, strategies, and metrics for diversity management in Navy Medicine
- Navy Medicine will be part of the Navy Diversity Network to infuse and value diversity throughout the organization as an expectation rather than as a separate program.



Questions?



FY05 Medical Dept Officer Programs Selection Statistics

30-Sep-05

Program	Desig	Goal	Select	Open	Accessed		Student				
							Prog	Goal	Select	Acc	
Medical	21050	14	14	0	14	100%					
Dental	22050	15	9	7	8	53%	HSCP	26	22		85%
MSC	23050	70	49	21	47	67%	HSCP	35	35		100%
Nurse	29050	99	57	42	53	54%	NCP	55	55		100%
HPSP MC	19750	291	162	129	162	56%	FAP	20	13		65%
HPSP DC	19850	85	69	16	68	80%	FAP	6	0		0%
HPSP MSC	19950	10	10	0	10	100%					
							DC Stu	5	0		0%